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6449	7590 11/02	/2009	h	ave its own certificate	of mailing	or transmission.	
ROTHWELL, 1425 K STREET SUITE 800	I S a u	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
WASHINGTON		(Depositor's name)					
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APPLICATION NO.	NO. FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/517,492	01/09/2006		Theo Burchard		2732-152		7126
TITLE OF INVENTION	: INTERLAMINAR ST	RUCTURE FOR SECUR	ITY ELEMENT				-1
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV. PAID ISSU	E FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	02/02/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS				
JOY, D.	AVID J	1794	264-229000				
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-C Number is required.		(1) the names of up or agents OR, altern (2) the name of a si registered attorney 2 registered patent a listed, no name will	reprinting on the patent front page, list the names of up to 3 registered patent attorneys ents OR, alternatively, the name of a single firm (having as a member a cered attorney or agent) and the names of up to istered patent attorneys or agents. If no name is , no name will be printed. Rothwell, Figg, Ernst & Manbeck, P.C.				
B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Giesecke & Devrient GmbH Muenchen, GERMANY							
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	☐ Individual ☐ C	orporation o	or other private gro	up entity Government
4a. The following fee(s)	No small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2135 (enclose an extra copy of this form).					
a. Applicant claim	itus (from status indicate as SMALL ENTITY stati	us. See 37 CFR 1.27.	☐ b. Applicant is no	longer claiming SMA	LL ENTITY	Y status. See 37 CI	FR 1.27(g)(2).
		uired) will not be accepte tes Patent and Trademark		an the applicant; a reg	istered attor	ney or agent; or th	e assignee or other party in
Authorized Signature				Date	2-1-6	0	
Typed or printed name George R. Repper			····	Registration l		,414	
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